1	-				Departmen Div	t of P	ublic of F	c He	alth	an	d Social	Services		_		10
					Food Esta								Page	<u></u>	of $\frac{Z}{Z}$	Ł
_		RSN	TYPE	GRADE	INSPECTION D	ATE	100	EST.	ABLIS	HIV	MENT NAM	E /	1000	1		-
Regul	_	1	-	6	7 / 30 /	IME OL		DED	_\∩(MIT H	1	S ILLEB	taurant LLC (Har mor	1)_	1651	17.0
Follow		1		RATING	11.		,,			- 0		toward 110		-		
						-	LOCATION (Address)									
Investigation A SANITARY PERMIT 1800 284												Mail Aracana Lan	00			
							MÉ	Compactors Mall, Harmon Loop Rel. No. of Risk Factor/Intervention Violations RISK CATEGORY							nev	
0	RESTABLISHMENT TYPE AREA TELL 63"							No. of Repeat Risk Factor/Intervention Violations				16	ISK CA	7	ואכ	
	201	THE RESERVE OF THE PERSON NAMED IN	SECTION AND DESCRIPTION OF	The second secon				Name and Address of the Owner, where		_		HEALTH INTERVE	NEON		>	_
-			FO	the same and the s			_				The state of the s	"in appropriate box for COS and/or		>	-	
IN=	In co	mpliano	e OU									ite during inspection R = Repeat vi		S = Dem	erit oc	ints
		ce Sta					R				liance Sta				R	
				St. Account to the second seco	ervision					1	2	Potentially Hazardous Food				
1/	N/O	UT			present, demonstrates			6				N/O Proper cooking time and temp				6
-	7			knowledge, and p	enorms duties							Proper reheating procedures for N/O Proper cooling time and temper		-		6
2/0	OI	Л	_		reness; policy present			6				NO Proper hot holding temperature		-	\vdash	6
	N OI				orting, restriction & exclusion			6			N' OUT NA	Proper cold holding temperatu		X		6
			e	Good Hygi	enic Practices				21	1	N OUT NA	NO Proper date marking and dispo	sition			6
4 1	N ON	JT N/A	N/O		ting drinking betelnut, or			6		i e		Consumer Advisor	٧			
5 1	2 DI	JT NV/	N/O	No discharge from	n eyes, nose, and mouth	+		6	-	T				_		
	2	1 107			amination by Hands			-	22	K	OUT NA	Consumer Advisory provided for	or new or			6
6	N) OL	JT N/		Hands clean and				6		Ψ	/	undercooked foods				
7 1	N)OI	JT N/A	N/O		tact with ready-to-eat foods	or		6				Highly Susceptible Popu	lations			
- 4	4	<u> </u>			e method properly followed	+	\vdash		23	1	N OUT NUN	Pasteurized foods used; prohib	ited foods no	4		6
8	N/OL	Л		accessible	shing facilities supplied &			6	-	1		offered Chemical				
					ed Source	120				T				T		
9/	N) OL	JT	-		m approved source			6	24		(AIM) TUO M	Food additives: approved and p	roperly used			6
10		_	(US/		proper temperature			6	25	K	Оолт	Toxic substances properly iden	tified, stored,			6
11 (0	y ou	_	_	The state of the s	dition, safe, and unadulterate	d		6		1		used				Ů
12	N OL	л (чи	NO	required records	available; shellstock tags,			6	Bar	T		Onformance with Approved Compliance with variance, spe		3		
1	3				m Contamination				26	IN	N OUT (A)	process, and HACCP plan	Janzeu			6
13/				Food separated a	nd protected			6		Ė	Diek factor	are improper practices or procedu	one identified	no the n	2000	-07
14 1	_			_	ces: cleaned & sanitized	X		6	3			ntributing factors of foodborne illnes				
15/1	OU	Т			of returned, previously ned, and unsafe food	1 1		6		L	intervention	s are control measures to prevent for	odborne illne	ss or inj	ury.	
					THE RESERVE TO SHARE THE PARTY OF THE PARTY	OD	रहा	AIL	PR	Ā	CTICES					
					ces are preventative measur	es to co	ntrol th	e intro	duction	of	pathogens, o	chemicals, and physical objects into				
Comp	Mark	X in b	ox If r	umbered item is n	ot in compliance and/or if CC							ng inspection R =Repeat violation	PTS =D			No.
COMP	manic	.0 Ju	tus	Safe Foo	d and Water	cos	n	PIO	COI	mp	llance Stat	Proper Use of Utens	de	cos	K	PIS
27		Paste	urized	eggs used where n		T		1	40	┢	In-use u	itensils: properly stored	19	133		1
28		Water	and lo	e from approved so	OUTCA			2	41	7	Utensils	, equipment and linens: properly sto	red, dried,			1
						1-1	-	_			handled			1		
29		vanar	ice obt	The Association and the Company of t	ed processing methods	11		1	42	_		se/single-service articles properly sused property	tored, used	-	-	1
20 1		Prope	r coolir		dequate equipment for	Т			143	-	Giovea	Utensils, Equipment and \	/ending			1
30				control				1	44	Т	Food an	d nonfood-contact surfaces cleanab		TT		4
31		Plant 1	ood pr	operly cooked for h	at holding			1	144	1	designe	d, constructed, and used				1
32		Appro	ved tha	wing methods use	d			1	45	1	Warewa	shing facilities: installed, maintained	, used; test			1
33		Them	omete	r provided and acc	urate	\Box		1	46	۲		l-contact surfaces clean -		+		1
			100	Food Ide	ntification				000			Physical Facilities				
34 Food properly labeled; original container								1	47	_		old water available, adequate pressu			0	2
35	-	1			od Contamination				48		_	g installed; proper backflow devices		\vdash		2
_	×_	_	_	nts, and animals no or prevented during	or present food peparation, storage &	-	\rightarrow	2	49	+-		and wastewater properly disposed		+	-	2
36		display	/		The state of the s			1	50	_	Toilet fa	cilities: properly constructed, supplie	d, & cleaned			2
37	ď.			anliness -				1	51	-	Garbage	e/refuse properly disposed; facilities	maintained			2
38		-		: properly used an	d stored	\Box		1	52	_	-	facilities installed, maintained, and				1
39	1.5			s and vegetables	d the above violetic-fr	1		1	53	1	Adequat	e ventilation and lighting; designate				1
I have read and understand the above violation(s), and I am aware of the corrective measures that shall be taken.							54	Т	Sanitan	Permit, Health Certificates valid an		T	T	2		
Person in Charge (Print and Sign)						e lake	11.		1 34	_	Сапцагу	12	· hroun			4
				1	1000					_		Date: 7/30				
PEH ID:	spect	:DF (Pri	nt and	Evan Evan	Lun EPHOTE W	R	30	2095	81			Follow-up (Circle one): YES	NO F	ollow-u _l	p Date	1
	Re	v: 08.2	7.15	V.RAUN	THE PHET COUNTY	PHSS	/DEH	Yello	w: Foo	d Es	stablishment					

				ith and Soci					
Division of Environmental Health								1	
Food Establishment Inspection Report Page Z of 4									
KING		Arman		M PADRES	bo As I	HASTRIAN IA	- 30		
	PECTION DATE SANITARY PERMIT	NO.	PERMI	THOLDER	MIALL,	HATEMON LO	op rec	· .	
07 , 30 , 2018 18000 2846 KINGS RESTAURANT LC									
	TEMPERATURE OBSERVATIONS								
	Item/Location	Temperature	(* F)		Item/Locati		Tempe	erature (° F)	
	ca Flat top Itot hold	156.2		Beef Stew		niller coldhold		3-1	
Sallsbury	patts !!	160.2		Beef Shanl	<u> </u>	- 1		6.63	
Fried Die	I State Not wells -	152.7		Porkribs Meat loat	1 11	1/-1/-		2.5	
Hambock		167.9		MIGHT 100T			4	3.2	
Beef Shan		198.7							
Fag Pla	ated cooking	186.3							
	an corring	201-3	-						
	ti Came Icebath cooling	136.6	83.3						
ITEM NO.	ank walk-in chiller coldhold	56 5)		PRECTIV	FACTOR			CORRECT	
	OBSERVA		2000					BY DATE	
Violation	s cited in this report must be corre പ്രസ്ഥ			ne frames inc am Food Cod		s stated in Sect	ions 8-4	05.11 and	
	AREGULARANSPEOTK	4 .				13/11/15/20	0.10-		
	TO COOR OF LATER 120 B	02000		WOULD O	11-01	ATA IN INCOME	DUSE		
	TO COMPLAINT # 18-132 P	2, 12EGAR	DIN	2 180 INS	sect for	ND IN CUST	<u>omees</u>		
	FOOD. THE FOLLOWING	was obs	EQV	F7:					
# 14	SANITIZED MOT AT POOPE	e STRE	NGT	4. FOOD-	CONTOUT	SNEFACESS	bou	S	
	BE PROPEDLY SANTIZED T	DESTR	OY P	ATHOGEN	.2			<u>s</u> ,	
+20	BEEF (SHANK) COLDHELD	AT 56.5	,56.	OFINN	MLK-IN (WILL FOL. PO	TENT-	Caption day	
	19 BEEF (SHANK) COLDHELD AT 56.5, 56.0 °F IN WALK-IN CHILLED, POTENT-								
							22 50	(0)	
+ 35	SHOW BE COLD HELD AT, OR BELOW 41°F TO PREVENT PATHOGEN GROWTH KO								
1 30	Q all								
								8 30 18	
	UNDERNEATH BACK GOOR. BASED ON THESE OBSTRUATIONS, IT APPEARS AN								
	ACTIVE COCKROACH INFECTATION IS PRESENT IN THE ISTAPLICHMENT WHICH								
	CONSTITUTES AN IMMINIST HEAVEH HAZAPO. PEST SHAW BE CONTROLLED								
	AND OUTER OPENINGS SHALL BE SCALED TO PREVENT THE ENTRY OF PESIS								
	THE CONTAMINATION OF POOD.								
# 40								8 30 18	
	INTENSILS SHOW BE STUZED TO POEVENT DOTHOGEN GROWTH.								
+45								8 30 18	
	BE PROVIDED TO ALLOW MONTORNIL OF SANTIZING SOLUTION STREWITH.								
±48								8 30 18	
MOPSINK LEAKING. ALL PLUMBING. SHOW BE PROPERLY INSTRUCT AND									
seed on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be									
submitted to the Director within the period of timelesta bilthed in the notice for corrections.									
Date: 7/30/18									
E. Lum, Epito II / J. RAYMUNDO EPITO T									
Rev: 08.27.15 V. RAYMUNDO EPHOT 7									

Division of Environmental Heaith Food Establishment Inspection Report Page 3 of 4 ESTABLISHMENT NAME LOCATION (Address) KING'S RESTAURANT LLC (HARMON) COMPADRES MALL, HARMON LOOP RD. SANITARY PERMIT NO. INSPECTION DATE PERMIT HOLDER 07/30/2018 180002846 KINGS RESTAURANT LLC CORRECT ITEM NO. OBSERVATIONS AND CORRECTIVE ACTIONS BY DATE Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code. MAINTAINES IN GOOD REPAIR. WALLS IN DOY STOPPLE POOM AND FLOOR THES NEAR MOP SINK AND 8 30 18 ICE MOCHINE IN DISCEPAIR. FACILITIES SAAN BENGINTAINED IN GOOD DEPOIR. HEINED; NOTICE OF CLOSURE ISSUED. SON TROY PEDMIT SUSPENDED DUE TO IMMINENT HEALTH HOZARD SEE MEM \$ 35). A \$ 100.00 RE-WSTATEMENT FEE ISHAW BE PAID AT THE DED-ADTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES MOON SUCCESSFUL COMPLETION OF AFOLLOWUP INCPEDITION, WHERE ALL REQUIREMENTS ON POCE 4 OF THIS INSPECTION REPORTABE MEST. BRIEFED PERSON-IN-CHARGE BRANDON SHIBAD ON DIGNE. Based on the inspection today, the items listed above identity violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. It saeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the police for corrections. Person in Charge (Print and Sign) DEH Inspector (Print and Sign) E. LUM, EPHO I v. ray munoo BPHO I

Department of Public Health and Social Services

Rev: 08.27.15

Department of Public Health and Social Services Division of Environmental Health Food Establishment Inspection Report Page <u>U</u> of <u>니</u> ESTABLISHMENT NAME LOCATION (Address) HARMON WOOP RO. **POSTAURANT** COMPADRES MALL KING'S INSPECTION DATE SANITARY PERMIT NO. PERMIT HOLDER 19,000 2846 07 130 12018 KING S RESTAURANT LLC CORRECT ITEM NO. **OBSERVATIONS AND CORRECTIVE ACTIONS** BY DATE Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code. Based on observations and evidence, it appears that there is an active cockroach infestation in the establishment, which constitutes an imminent health hazard. Per the GFC, an imminent health hazard is a significant threat or danger to public health that exists when there is evidence sufficient to show that a product, circumstance, or event creates a situation that requires immediate correction or cessation of operation to prevent injury. The establishment's Sanitary Permit is hereby suspended until all cited violations have been corrected and the following additional requirements, pursuant to GFC Section 8-102.10, to address the pest infestation are met: 1. Written documentation from the establishment's primary pest control company (PCC) regarding the services provided, which MUST INCLUDE, but not limited to, the following: A. Name of pesticide used: B. Number of baits, traps, and other methods used: C. Location of application; and D. Observations of each service conducted. 2. A written cleaning schedule from the establishment that indicates the following: A. Areas that will be cleaned and sanitized; B. How it will be cleaned and sanitized; and C. The frequency or how often it will be done. 3. Seal all openings of the establishment to prevent the entrance and travel of the pest. 4. Remove or prevent any access to food and/or water. A. Food that is not bottled or canned must be placed in containers prior to storage or when not in use; and B. Place food-contact utensils and equipment in containers prior to storage or when not in use. 5. Sanitize all hard surfaces and food-contact surfaces daily in food preparation areas prior to operation. An official follow-up inspection WILL NOT BE CONDUCTED until the establishment can provide threeconsecutive days of no activity observed from their PCC, and all violations cited and additional requirements stated above are met. An assessment may be requested by the establishment and will be scheduled and conducted at the inspector's earliest available schedule. Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If speking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice you corrections. Person In Charge (Print and Sign) Date: DEH Inspector (Print and Sign) Date: E. LUM , LOHO I v. Paymungo PPHO I Rev: 11.28.16

GOVERNMENT OF GUAM



DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES DIPATTAMENTON SALUT PUPBLEKO YAN SETBISION SUSIAT



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	Control of the contro
IE BAZA CALVO GOVERNOR	DIRECTOR
AY TENORIO ENANT GOVERNOR	Date: 07 30 2019
	Date: 07 30 2019
KINGS PETAULANT UC (HAPMON) Name of Establishment	
As a result of this inspection your establishment received a:	
☐ LETTER OF WARNING	
(Demerit/G	rade Points)
Once you have corrected all violations cited on your establis	chment's inspection report you must provide us a

written request for re-inspection to include a description of the corrective measures that you have implemented. If we do not receive a written re-inspection request from you, we will conduct a follow-up inspection after ten (10) calendar days from the official receipt of this notice to ensure that corrective measures have been taken.

Failure to correct violations may result in the closure of your establishment pursuant to section 21109(b) of 10GCA, Chapter 21.

M NOTICE OF CLOSURE

(Demerit/Grade Points)

(Demerit/Grade Points)

Once you have corrected all violations cited on your establishment's inspection report, you must provide us a written request for re-inspection to include a description of the corrective measures that you have implemented. Unlike an establishment who has received a letter of warning, an establishment shall remain closed unless a written request for re-inspection is made. Under 10 GCA Ch. 21 §21109(b), suspension without prior hearing may be imposed until the violation is corrected. You may also request a hearing to the Division of Environmental Health within five (5) calendar days of the date of this notice. When a hearing is requested following a suspension without prior hearing, it shall be discretionary with the Director as to whether the suspension shall be continued pending the hearing.

We look forward to working closely with you as partners in promoting health and sanitary practices on Guam. If you need further assistance, you can reach us at 735-7221 or (fax) 734-5556. Si Yu'us Ma'ase.

FOR: LEO G. CACIL

AUTING. Director

Received I

Establishment Representative